



**THOMAS L. GARTHWAITE, M.D.**  
Director and Chief Medical Officer

**FRED LEAF**  
Chief Operating Officer

COUNTY OF LOS ANGELES  
DEPARTMENT OF HEALTH SERVICES  
313 N. Figueroa, Los Angeles, CA 90012  
(213) 240-8101

BOARD OF SUPERVISORS

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First District

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June 17, 2004

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Dear Supervisors:

**SEXUALLY TRANSMITTED DISEASE PROGRAM  
SERVICES CONTRACT AMENDMENT AND  
ACCEPTANCE OF NOTICES OF COOPERATIVE AGREEMENTS**  
(All Districts) (3 Votes)

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and instruct the Director of Health Services, or his designee, to sign Amendment No. 5, substantially similar to Exhibit I, to County Agreement No. H-211172 with Los Angeles Gay and Lesbian Center (LAGLC) to increase the County's maximum obligation by \$95,304 from \$288,214 to \$383,518 for an increase in services, with a net County cost of \$288,214 and CDC funding of \$95,304 for Fiscal Year (FY) 2004-05.
2. Approve and instruct the Director of Health Services, or his designee, to accept Notice of Cooperative Agreement (NCA) No. R18/CCR921000-03 and Amendment No. 1 to the NCA, R18/CCR921000-03-01, Exhibits II and III, from the CDC for the Recommending Human Immunodeficiency Virus (HIV)/Sexually Transmitted Disease (STD) Counseling/Testing in Ambulatory Clinic Emergency Room (ER) Project in the amount of \$126,074 and \$140,429, respectively, effective September 30, 2003 through September 29, 2004 to support existing STD project staff.

PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTIONS:

In approving these actions, the Board is authorizing the Director of Health Services, or his designee, to sign an agreement amendment with LAGLC for the provision of additional STD screening, treatment, case finding, education, counseling, and testing services and to accept funding from the CDC to support staffing needs for the HIV/STD Counseling and Testing in Ambulatory Clinic ER Project.

FISCAL IMPACT/FINANCING:

The maximum County obligation for Amendment No. 5 to County Agreement No. H 211172 with LAGLC is \$383,518, with a net County cost of \$288,214 and CDC funding of \$95,304, effective July 1, 2004 through June 30, 2005.

The total project cost for the ER project is \$266,503 for the period of September 30, 2003 through September 29, 2004. Notice of Cooperative Agreement No. R18/CCR921000-03 is in the amount of \$126,074 in financial assistance, effective September 30, 2003 through September 29, 2004. This amount represents carryover CDC funds from the period of September 30, 2002 through September 29, 2003. Amendment No. 1 to the NCA, R18/CCR921000-03-1 is in the amount of \$140,429 in supplemental financial assistance, effective September 30, 2003 through September 29, 2004.

Funding for FY 2004-05 is included in the Proposed Budget. There are no net County costs.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

Since 1956, the Federal government has provided assistance to the Department of Health Services (Department) STD Program by awarding grant funds, financial assistance (FA) and/or assigning federal government personnel, direct assistance (DA) to support contractual services for the STD program.

The majority of STD program activities are supported by a Comprehensive Sexually Transmitted Disease Prevention Systems (CSPS) Notice of Grant Award (NGA) allocated to the County yearly, subject to approval and availability of funds by the CDC.

On several subsequent occasions, the Board has accepted NGAs, supplemental funding, approved carryover of unobligated CSPS funds from previous years, and delegated authority to the Director, or his designee to accept funding from the CDC to support STD Program activities and approved related agreements and/or amendments.

Since 1974, the County has contracted with LAGLC to provide STD screening, treatment, case finding, and education services in the Central and West Los Angeles areas, and recently the Hollywood area.

On December 9, 2003 the Board approved Amendment No. 4 to County agreement No. H- 211172 with LAGLC in the amount of \$360,745 for FY 2003-04 to increase clinic hours and personnel for STD services.

On February 27, 2004, the Department accepted Amendment No. 5 to the CDC award No. H25/CCH904366 in the amount of \$995,748 in FA and \$173,132 in DA through the delegated authority process to support STD activities for CY 2004. This amount reflects 25% of the total expected award for CY 2004. Further, \$95,304 was allocated to LAGLC for an increase in clinical, educational and counseling services for FY 2004-05.

NCA No. R18/CCR921000-3 and Amendment No. 1 provide funding to support existing STD staff for the provision of the Recommending Human Immunodeficiency Virus (HIV)/ Sexually Transmitted Disease (STD) Counseling/Testing in Ambulatory Clinic Emergency Room (ER) project through September 29, 2004.

County Counsel has approved Amendment No. 5 and Exhibits I, II and III as to form.

Attachments A, B and C provide additional information. Attachments B and C are Grant Management Statements which the Board instructed all County departments to include for grant awards exceeding \$100,000.

#### CONTRACTING PROCESS:

Services provided under the current LAGLC agreement were initially awarded on a sole source basis. LAGLC has proven successful in encouraging sexually active or gay bisexual men and women in Los Angeles County who have contagious, infectious, or communicable STDs to seek proper medical treatment and care. Additionally, LAGLC serves as a sentinel surveillance for a number of important STDs and provides services to a population that does not seek STD medical care from the County and has a high rate of STD morbidity.

Therefore, DHS did not advertise the amendment as a contracting opportunity on the Los Angeles County Web Site.

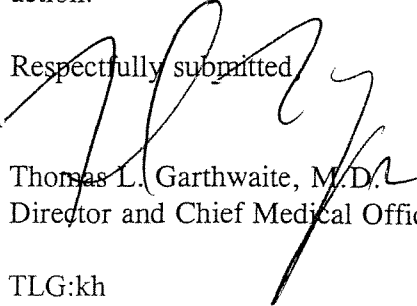
#### IMPACT ON CURRENT SERVICES (OR PROJECTS):

Approval of the recommended actions will expand the current level of services performed by LAGLC in the Central, West Los Angeles and Hollywood areas of the County during FY 2004-05. Acceptance of CDC funding for the ER project will provide continued support for existing STD staff.

The Honorable Board of Supervisors  
June 17, 2004  
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When approved, the Department of Health Services requires three signed copies of the Board's action.

Respectfully submitted,



Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

TLG:kh

Attachments (3)

c: Chief Administrative Officer  
County Counsel  
Executive Officer, Board of Supervisors

BLETCDD3044:KH

SUMMARY OF AGREEMENT

1. TYPE OF SERVICES:

Sexually Transmitted Disease screening, treatment, case finding, education, counseling and testing .

2. AGENCY/ CONTACT PERSON:

Department of Health and Human Services  
Federal Centers for Disease Control and Prevention  
Procurement and Grants Office - Acquisition and Assistance Branch A  
2920 Brandywine Road, Suite 3000  
Atlantic, Georgia 30341-5530  
Attention: Carlos M. Smiley, Grants Management Officer  
Telephone: (770) 488-2573 Facsimile: (770) 488-2670  
e-mail address: [cms@cdc.gov](mailto:cms@cdc.gov)

L.A. Gay and Lesbian Center (LAGLC) - Sexual Health Program  
1625 North Schrader Blvd.  
Los Angeles, California 90028-6213  
Attention: Robert Bolan, Director of Health Services  
Telephone: (323) 993-7500 Facsimile: (323) 993-7599  
e-mail address: [www.laglc.org](http://www.laglc.org)

3. TERMS OF AMENDMENTS AND NGA:

Amendment No. 5 to Agreement No. H 211172 with LAGLC is effective July 1, 2004 through June 30, 2005.

Notice of Cooperative Agreement Nos. R18/CCR921000-03 and R18/CCR921000-03-01 are as follows:

Project Period: September 30, 2001 through September 29, 2004

Budget Period: September 30, 2003 through September 29, 2004

4. FINANCIAL INFORMATION:

The maximum County obligation for Amendment No 5 to County Agreement No. H 211172 with LAGLC is \$383,518, with a net County cost of \$288,214 and CDC funding of \$95,304, effective July 1, 2004 through June 30, 2005.

The total project cost for the ER project is \$266,503 for the period of September 30, 2003 through September 29, 2004. Notice of Cooperative Agreement No. R18/CCR921000-03 is in the amount of \$126,074 in financial assistance, effective September 30, 2003 through September 29, 2004. This amount represents carryover CDC funds from the period of September 30, 2002 through September 30, 2003. Amendment No. 1 to the NCA, R18/CCR921000-03-1 is in the amount of \$140,429 in supplemental financial assistance, effective September 30, 2003 through September 29, 2004.

Funding for FY 2004-05 is included in the Proposed Budget. There are no net County costs.

5. GEOGRAPHIC AREA TO BE SERVED:

Countywide.

6. DESIGNATED ACCOUNTABLE FOR PROJECT MONITORING:

Public Health: Peter R. Kerndt, M.D., Director, Sexually Transmitted Disease Program

7. APPROVALS:

Public Health: John F. Schunhoff, Ph.D., Chief of Operations

Contract Administration: Irene E. Riley, Director

County Counsel (approval as to form): Kelly Auerbach Hassel, Deputy County Counsel

BLETCD3044.KH

## ATTACHMENT B

**Los Angeles County Chief Administrative Office  
Grant Management Statement for Grants Exceeding \$100,000**

Department: SEXUALLY TRANSMITTED DISEASE PROGRAM

Grant Project Title and Description - RECOMMENDING HIV/STD COUNSELING/TESTING ER

Sexually Transmitted Disease counseling and testing in ambulatory clinic emergency room project.

Funding Agency	Program (Fed. Grant #/State Bill or Code #)	Grant Acceptance Deadline
CDC	NCA No. R18/CCR921000-03	ASAP

Total Amount of Grant	\$126,074	County Match Requirements	N/A
Grant Period: One Year	Begin 9/30/03	End Date:	9/29/04
Number of Personnel Hired -Grant	3	Full 3	Part Time

**Obligations Imposed on the County When the Grant Expires**

Will all personnel hired for this program be informed this is a grant funded program? Yes ☒ No ☐

Will all personnel hired for this program be placed on temporary ("N") items? ☒ No ☐

Is the County obligated to continue this program after the grant expires Yes ☐ No ☒

If the County is not obligated to continue this program after the grant expires, the Department will:

a). Absorb the program cost without reducing other services Yes ☐ No ☒

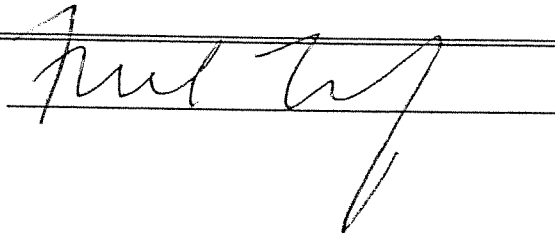
b). Identify other revenue sources Yes ☒ No ☐  
Describe

c). Eliminate or reduce, as appropriate, positions/program costs funded by this grant. Yes ☒ No ☐

Impact of additional personnel on existing space: None

Other requirements not mentioned above: None

Department Head



Date 6/15/04

**Los Angeles County Chief Administrative Office  
Grant Management Statement for Grants Exceeding \$100,000**

Department: SEXUALLY TRANSMITTED DISEASE PROGRAM

Grant Project Title and Description - RECOMMENDING HIV/STD COUNSELING/TESTING ER  
Sexually Transmitted Disease counseling and testing in ambulatory clinic emergency room project.

Funding Agency	Program (Fed. Grant #/State Bill or Code #)	Grant Acceptance Deadline
CDC	NCA No. R18/CCR921000-03-1	ASAP

Total Amount of Grant	\$140,429	County Match Requirements	N/A
Grant Period: One Year	Begin 9/30/03	End Date:	9/29/04
Number of Personnel Hired -Grant	3	Full	3 Part Time

**Obligations Imposed on the County When the Grant Expires**

Will all personnel hired for this program be informed this is a grant funded program? Yes ☒ No ☐

Will all personnel hired for this program be placed on temporary ("N") items? ☒ No ☐

Is the County obligated to continue this program after the grant expires Yes ☐ No ☒

If the County is not obligated to continue this program after the grant expires, the Department will:

a). Absorb the program cost without reducing other services Yes ☐ No ☒

b). Identify other revenue sources Yes ☒ No ☐

Describe

c). Eliminate or reduce, as appropriate, positions/program costs funded by this grant. Yes ☒ No ☐

Impact of additional personnel on existing space: None

Other requirements not mentioned above: None

Department Head

*Frank Lee*

Date 6/15/04



Contract No. H-211172-5

**SEXUALLY TRANSMITTED DISEASE  
SCREENING, TREATMENT, CASE FINDING AND  
EVALUATION SERVICES AGREEMENT**

Amendment No. 5

THIS AMENDMENT is made and entered into this \_\_\_\_\_ day  
of \_\_\_\_\_, 2004,

by and between

COUNTY OF LOS ANGELES (hereafter  
"County"),

and

L.A. GAY AND LESBIAN CENTER  
(LAGLC), a California nonprofit  
corporation (hereafter  
"Contractor").

WHEREAS reference is made to that certain document entitled  
"SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASEFINDING,  
AND EDUCATION SERVICES AGREEMENT", dated June 13, 2000 and  
further identified as County Agreement No. H-211172, between the  
County and L.A. Gay and Lesbian Center ("Contractor") and any  
Amendments thereto ( all hereafter referred to as "Agreement ");  
and

WHEREAS, it is the intent of the parties hereto to amend  
Agreement to increase the maximum County obligation and make  
other hereinafter designated changes; and

WHEREAS, said Agreement provides that changes may be made in

the form of a written amendment which is formally approved and executed by the parties.

NOW, THEREFORE, the parties hereto agree as follows:

1. This Amendment shall be effective July 1, 2004.
2. Paragraph 2, DESCRIPTION OF SERVICES, shall be revised as follows:

"2. DESCRIPTION OF SERVICES: Contractor shall provide the services described in Exhibit A-5, attached hereto and incorporated herein by reference. Services shall be provided to persons who live within the County of Los Angeles who suffer from or are suspected of suffering from sexually transmitted diseases. County approved supplies provided pursuant to this Agreement shall be used solely for the detection and treatment of sexually transmitted diseases. The program under which these services shall be provided is the Sexually Transmitted Disease Control Program (hereafter "Program")."

3. Paragraph 3, MAXIMUM OBLIGATION OF COUNTY, shall be revised as follows:

"3. MAXIMUM OBLIGATION OF COUNTY: During the period July 1, 2004 through June 30, 2005, the maximum obligation of County for all services provided hereunder shall not exceed Three Hundred Eighty-Three Thousand, Five Hundred

Eighteen Dollars (\$383,518) in accordance with Schedule 2, attached hereto and incorporated herein by reference.

4. Paragraph 4, BILLING AND PAYMENT, shall be revised as follows:

"4. BILLING AND PAYMENT: Contractor shall bill County monthly in arrears for the lower of actual costs or 1/12th of the maximum payment obligation of \$383,518. Billing shall be made and forwarded to County by the 10<sup>th</sup> of each month for the preceding calendar month.

Contractor may reallocate up to ten percent (10%) of any amount in any expenditure category to any other expenditure category. Director may authorize Contractor to exceed any expenditure category beyond the ten percent (10%) reallocation provided County's maximum obligation shall not exceed that provided herein; and provided further that Contractor submits a written request and justification to the Director for any reallocation in excess of ten percent (10%) and obtains Director's prior written approval.

County shall reimburse Contractor, monthly in arrears upon submission to Director by Contractor of an invoice on such forms as may be furnished or required by County. Should there be an interruption in Contractor's provision

of direct patient care services under this Agreement in any given month in excess of two weeks, payment to Contractor for such services shall be made at the discretion of Director. In no event shall County be required to pay Contractor more than the maximum obligation of County as set forth in Paragraph 3, MAXIMUM OBLIGATION OF COUNTY.

The County Public Health Laboratory provides in-kind diagnostic testing for sexually transmitted diseases for the LAGLC. The tests are provided at no charge and are appropriate for the care and treatment of the population served through the LAGLC Sexually Transmitted Disease (STD) Clinic. The referenced tests are as follows: Rapid Plasma Reagin (RPR) and Treponema Pallidum Particle Agglutination (TPPA) tests for syphilis; Nucleic Acid Amplification Testing (NAAT) for chlamydia and gonorrhea from cervical, urethral and urine specimens; non-amplified DNA probe for gonorrhea from extragenital sources, culture for gonorrhea (for specific studies as arranged with the laboratory), HIV tests and other tests as recommended or deemed appropriate by the Public Health STD Program. Contractor shall not bill or charge patients for any of these County in-kind laboratory services under the terms

and conditions of this agreement.

5. Paragraph 43, CONTRACTOR'S WARRANTY OF ADHERENCE TO COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM, shall be revised as follows:

"43. CONTRACTOR'S WARRANTY OF ADHERENCE TO COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM:

A. Contractor acknowledges that County has established a goal of ensuring that all individuals who benefit financially from County through contract are in compliance with their court-ordered child, family, and spousal support obligations in order to mitigate the economic burden otherwise imposed upon County and its taxpayers.

As required by County's Child Support Compliance Program (County Code Chapter 2.200) and without limiting Contractor's duty under this contract to comply with all applicable provision of law, Contractor warrants that it is now in compliance and shall during the term of this contract maintain in compliance with employment and wage reporting requirements as required by the Federal Social Security Act (42 USC Section 653a) and California Unemployment Insurance Code Section 1088.5, and shall Implement all lawfully served Wage and Earnings

Withholding Orders or CSSD Notice of Wage and Earnings Assignment for Child, Family, or Spousal Support, pursuant to Code of Civil Procedure Section 706.031 and Family Code Section 5246(b).

B. TERMINATION FOR BREACH OF WARRANTY TO MAINTAIN COMPLIANCE WITH COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM:

Failure of Contractor to maintain compliance with the requirements set forth in Paragraph 43 "CONTRACTOR'S WARRANTY OF ADHERENCE TO COUNTY'S CHILD SUPPORT COMPLIANCE PROGRAM" shall constitute default under this contract. Without limiting the rights and remedies available to County under any other provision of this contract, failure of Contractor to cure such default within 90 calendar days of written notice shall be grounds upon which County may terminate this contract pursuant to Paragraph 28, "TERMINATION FOR CONTRACTOR'S DEFAULT" and pursue debarment of Contractor pursuant to County Code Chapter 2.202."

6. Paragraph 48, CONTRACTOR RESPONSIBILITY AND DEBARMENT, shall be revised as follows:

"48. CONTRACTOR RESPONSIBILITY AND DEBARMENT:

A. A responsible Contractor is a Contractor who has demonstrated the attribute of trustworthiness, as well as

quality, fitness, capacity and experience to satisfactorily perform the contract. It is the County's policy to conduct business only with responsible contractors.

B. The Contractor is hereby notified that, in accordance with Chapter 2.202 of the County Code, if the County acquires information concerning the performance of the Contractor on this or other contracts which indicates that the Contractor is not responsible, the County may, in addition to other remedies provided in the contract, debar the Contractor from bidding or proposing on, or being awarded, and/or performing work on County contracts for a specified period of time not to exceed 3 years, and terminate any or all existing contracts the Contractor may have with the County.

C. The County may debar a Contractor if the Board of Supervisors finds, in its discretion, that the Contractor has done any of the following: (1) violated a term of contract with the County or a nonprofit corporation created by the County, (2) committed an act or omission which negatively reflects on the Contractor's quality, fitness or capacity to perform a contract with the County, any other public entity, or a nonprofit corporation

created by the County, or engaged in a pattern or practice which negatively reflects on same, (3) committed an act or offense which indicated a lack of business integrity or business honesty, or (4) made or submitted a false claim against the County or any other public entity.

D. If there is evidence that the Contract may be subject to debarment, the Department will notify the Contractor in writing of the evidence which is the basis for the proposed debarment and will advise the Contractor of the scheduled date for a debarment hearing before the Contractor Hearing Board.

E. The Contractor Hearing Board will conduct a hearing where evidence on the proposed debarment is presented. The Contractor and/or the Contractor's representative shall be given an opportunity to submit evidence at that hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the contractor shall be debarred, and, if so, the appropriate length of time of the debarment. The Contractor and the Department shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors.



F. After consideration of any objections, or if no objections are submitted, a record of the hearing, the proposed decision and any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny or adopt the proposed decision and recommendation of the Hearing Board.

G. These terms shall also apply to [subcontractors/ subconsultants] of County Contractors.

7. Effective July 1, 2004, Exhibit A-5, shall be added to the Agreement.

8. Effective July 1, 2004, Schedule 2 shall be added to the Agreement.

9. Effective July 1, 2004, Exhibit A-5 and Schedule 2 shall supersede and replace Exhibit A-4 and Schedule 1-D, respectively.

10. Except for the changes set forth hereinabove, Agreement shall not be changed in any other respect by this Amendment.

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its

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Director of Health Services, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By \_\_\_\_\_  
Thomas L. Garthwaite, M.D.  
Director and Chief Medical Officer

L.A. GAY AND LESBIAN CENTER  
Contractor

By \_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

Title \_\_\_\_\_  
(AFFIX CORPORATE SEAL HERE)

APPROVED AS TO FORM  
BY THE OFFICE OF THE COUNTY COUNSEL

APPROVED AS TO CONTRACT  
ADMINISTRATION:

Department of Health Services

By \_\_\_\_\_  
Irene E. Riley, Director  
Contract Administration

AMENDCD3046.KH  
kh:6/9/04

**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

PROGRAM UNITS

Program is composed of the following units:

- I. Administration
- II. Medical Records and Admissions
- III. Laboratory
- IV. Case Management
- V. Medical Services
- VI. Health Education

UNITS DESCRIPTION AND OBJECTIVES

Contractor agrees to provide services of the Program which will be organized as outlined herein below by six major program units. Contractor further agrees to exercise all reasonable efforts to attain all Program objectives as presented in this outline of Program units.

The Sexually Health Program Clinic of the L.A. Gay and Lesbian Center (hereinafter referred to as ("Clinic")) is composed of six units, and is organized as follows:

I. ADMINISTRATION

A. Description of Unit:

For purpose of this Agreement, the Clinic's Director of the Sexual Health Program shall ensure that the Clinic is operated in compliance with laws, regulations, contract and policy pursuant to the Departmental publication of Sexually Transmitted Disease Procedure Manual.

The Contractor will act as a sentinel surveillance site for a number of important STDs including Gonorrhea, Chlamydia, Syphilis, Human Papilloma Virus (HPV), herpes and other STDs. The Contractor will also provide basic epidemiologic information on a specific population of gay men and lesbians with high rates of STD morbidity. Surveillance information obtained via the Clinic is critical for health promotion and disease control within a population exhibiting high STD morbidity.

**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

B. Unit Objectives:

1. Supervise, direct, and coordinate all units of Clinic.
2. Monitor provision of medical services to ensure compliance with laws, regulations, contract and County policy.
3. Solicit, receive, manage, control, and direct Clinic funds.
4. Prepare and forward periodic reports as required by County.
5. Represent Clinic as required.
6. Ensure that all licenses, insurance and other documents are current and meet requirements of laws, regulations and contract.
7. Recruit, train, and evaluate salaried and volunteer staff.
8. Control supplies, service levels, and inventory.

II. MEDICAL RECORDS AND ADMISSIONS

A. Description of Unit:

Unit shall prepare and store charts, records, test results, and pertinent papers in order to provide adequate documentation of medical care to each client accepted into Clinic. Unit shall schedule appointments, admit and screen clients, collect fees and donations, and any related revenues including maintenance of adequate documentation.

B. Unit Objectives:

1. Operate appointment and admission systems to ensure intake of an average of eighteen clients per clinic at the McDonald/Wright Building (256 clinics per year/approximately 4,608 clients per year); an average of two clients per screening clinic at *The SPOT* (190 clinics per year/approximately 380 clients per year); an average 16 clients per one weekly treatment clinic at *The SPOT* (48 clinics per year /approximately 768 clients per year) and an average of 2,056 unduplicated clients per year at community fairs, festivals, bathhouses, etc.

**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

Such figures reported as listed above shall consist of approximately 4,285 men who have sex with men and/or women (MSM/W), and approximately 55 lesbians exhibiting high STD morbidity.

2. Maintain client records in an efficient manner and in accordance with law and established confidentiality.
3. Collect, analyze, maintain and report data to County as required under the provisions of this Agreement.
4. Operate all services without charge, but accept donations from clients and the general public, and track and account for all such revenue.
5. Staff nurse review of all medical records after each clinic session according to accepted standards, and reporting of positive results on County Morbidity Results (CMR) cards.

**III. LABORATORY**

**A. Description of Unit:**

The laboratory shall be licensed, supervised by a licensed medical laboratory technologist(s), and shall perform, (at a minimum, tests for gonorrhea and syphilis).

In addition, the laboratory is licensed to perform:

- Urine Pregnancy
- Herpes Simplex Type 1 and/or 2 Antigen
- Chlamydia Antigen (Urine or Urethral and Cervical)
- Strep Throat
- H. Ducreyi Presumptive ID
- Vincent's Angina Presumptive
- Candida Albicans (Rule Out)

**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

- T. Vaginalis
- Fungal Skin Scrapings

**B. Unit Objectives**

1. At a minimum, perform tests for Syphilis and Gonorrhea, Chlamydia, Herpes, Candida, Urine Pregnancy, Strep Throat, H. Ducreyi, Presumptive ID, Vincent's Angina Presumptive, T. Vaginalis, Fungal Skin Scrapings.
2. Process and report stat laboratory tests including, but not limited to, Rapid Plasma Reagin, gram stain, darkfield exam.
3. Report all positive/reactive findings indicative of Sexually Transmitted Disease as per Section 25.5 of the California Code of Regulations.
4. Maintain records of all such tests as required by law and regulations.
5. Maintain inventory control.
6. Perform and record quality control tests as required by law.
7. Maintain an up-to-date lab manual.

**IV. CASE MANAGEMENT:**

**A. Description of Unit:**

This unit shall interview or counsel, follow-up and document treatment of persons identified at Clinic, or through referral from the outside as having syphilis, gonorrhea, chlamydia, non gonococcal urethritis and/or chancroid.

**B. Unit Objectives:**

1. Syphilis Case Management
  - a. Counsel/Interview 90 - 95% of all primary, secondary, and early latent syphilis cases using motivational techniques and the self referral checkmate type of system within three days of detection/diagnosis. Counseling shall emphasize patient compliance, patient knowledge of disease, and referral of persons exposed to the patient's infection.

**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

- b. Re-counsel 90 - 95% of total cases counseled (70 - 75% within 7 days) for the purpose of ensuring medical compliance and referral of sex partners for counseling.
- c. Examine new locatable contacts, suspects, associates and high priority patients requiring further evaluation or treatment (as determined by Program policy) within the following time frames.\*

45 to 50% in 3 days  
70 to 75% in 7 days  
80 to 85% in 14 days

\*Computing time from date assigned by Epi Supervisor.

- d. Provide epidemiologic (preventive) treatment for 90 – 95% of clinically and serologically negative contacts who could nevertheless be incubating syphilis.
- e. Keep legible records and statistics as required by County.

2. Gonorrhea Case Management

- a. Counsel/Interview 85 - 90% of all clients clinic diagnosed as having gonorrhea using motivational techniques and a self referral checkmate type system.
- b. Record all counseling activity and submit to County on CMR card.
- c. Assure that 90% of gonorrhea cases (laboratory confirmed) are adequately treated within ten days of report by lab.
- d. Provide epidemiologic treatment for 90 - 95% of laboratory negative contacts to gonorrhea patients.

3. Chlamydia Case Management (reporting began 03/13/92)

- a. Counsel/Interview 85 – 90% of all clients diagnosed as having Chlamydia Antigen positive test using motivational techniques and self referral checkmate type system.
- b. Record all counseling activity and submit to County on CMR card.

**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

- c. Assure that chlamydia cases (laboratory confirmed) are adequately treated.
- d. Provide epidemiologic treatment for 90 – 95% laboratory negative contacts.
- 4. Non Gonococcal Urethritis Case Management. (Reported since 1990 following the same guidelines as sections 2 and 3 above)
- 5. Chancroid Case Management. (Reported following guidelines as in Section 3 and 4 above.)
- 6. Herpes (Not reportable, but all clients are interviewed and provided with education and counseling.)

V. MEDICAL SERVICES

A. Description of Unit:

In accordance with County Sexually Transmitted Disease guidelines, this unit shall assess and treat all clients requesting services.

B. Unit Objectives:

- 1. Medically assess and plan treatment for all such clients and provide such treatment according to County protocol.
- 2. Refer for medical follow-up when treatment is required beyond the scope of Clinic's capability.
- 3. Counsel and educate clients as to the nature of their disease and appropriate follow-up care.
- 4. Re-schedule for follow-up testing and/or treatment as required.



**COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES  
SEXUALLY TRANSMITTED DISEASE SCREENING, TREATMENT, CASE FINDING  
AND EVALUATION SERVICES**

**SCOPE OF SERVICES  
JULY 01, 2004 – JUNE 30, 2005**

VI. HEALTH EDUCATION:

A. Description of Unit:

The Unit shall provide professional education expertise for developing and organizing STD prevention oriented services and outreach activities associated with all sexually transmitted diseases including information about Acquired Immune Deficiency Syndrome (AIDS). Provision of such services shall occur primarily at *The SPOT*.

B. Unit Objectives:

1. Maintain close liaison with, both, in-house and outside education and research activities.
2. Translate most recent research results into meaningful information for clients, volunteers, staff, media, and all outreach activities.
3. Provide professional consultation to volunteers, staff, agency, and organizations where focus is educational outreach.
4. Ensure education of all clients to promote prevention of sexually transmitted disease including HIV.
5. Organize updates and/or in-service trainings for health professionals staff and volunteers to facilitate dissemination of the most recent sexually transmitted disease information.

LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES  
PUBLIC HEALTH PROGRAMS AND SERVICES  
SEXUALLY TRANSMITTED DISEASE PROGRAMS

L.A. GAY & LESBIAN CENTER  
Contract H-2111172  
July 01, 2004 through June 30, 2005

		MONTHLYS ALARY	# OF MONTHS	% OF FTE	Approved FY04- 05 County Fund	AMENDMENT #5 STD Grant Fund	FY 04-05 Total Budget
<b>A. SALARIES &amp; EMPLOYEE BENEFITS</b>							
<b>Full-Time Employees</b>							
5000	Program Director - SHP (Horton, T)	4,408.59	12	40%	\$20,147		\$20,147
	STD Coordinator (Manning, P)	2,766.72	12	50%	\$16,118	\$5,000	\$21,118
	Epidemiologist (Amezola de Herrera, P)	4,408.59	12	100%	\$51,373		\$51,373
	Administrative Assistant (Gallegos, M. & 1 vacant)	2,136.17	12	100%	\$24,900	\$5,228	\$30,128
	Medical Records AA (Taylor, P)	3,152.73	12	100%	\$36,743		\$36,743
	Licensed Vocational Nurse (Ybarra, S. & 1 vacant)	2,890.73	12	90%	\$30,314	\$9,216	\$39,530
	Spot STD/HIV Coordinator (Kerrone, D)					\$5,000	\$5,000
	Lab Assistant (Barraza, C. & 1 vacant)					\$5,760	\$5,760
	STD/HIV Counselors/Interviewers (Castrejon, E. & Cross J)					\$7,738	\$7,738
	Mid-Level Practitioner (Vacant)					\$11,808	\$11,808
	Health Data Coordinator/Admin. Asst. (Vacant)					\$13,998	\$13,998
	Subtotal, Salaries				\$179,595	\$63,748	\$243,343
6001	FICA/MFICA: 8% of Salaries				\$13,739		\$13,739
6003	SUI: 3% of 1st \$8,000/FTE				\$0		\$0
6051	Workers' Comp: 2% f salaries				\$4,454		\$4,454
6052	Health: \$310 per FTE/Month				\$0		\$0
6053	LTD: 0% of Salaries				\$808		\$808
	Benefits (Approximately 21.18%)				\$38,047		\$38,047
	Benefits (Approximately 13.66%)					\$8,708	\$8,708
	<b>Subtotal, Full-Time Employee Salaries &amp; Benefits</b>				<b>\$217,642</b>	<b>\$72,456</b>	<b>\$290,098</b>
<b>B. SERVICES &amp; SUPPLIES</b>							
	Outside Services - Contract Physicians				\$11,300		\$11,300
	Outside Services - Medical Other				\$19,500		\$19,500
	Outside Services - Other				\$2,000		\$2,000
	Educational Materials				\$800	\$469	\$1,269
	Printing & Duplicating				\$1,000		\$1,000
	Pharmaceuticals				\$10,000	\$2,259	\$12,259
	Seminars & Conferences				\$1,000		\$1,000
	Staff Training				\$900		\$900
	Supplies - General				\$5,000	\$1,200	\$6,200
	Travel				\$1,000		\$1,000
	Advertising				\$1,500		\$1,500
	Insurance - Malpractice				\$1,000		\$1,000
	Supplies - Medical				\$5,000	\$1,200	\$6,200
	Telephone				\$500		\$500
	Event Expenses				\$2,000		\$2,000
	Other Laboratory Testing					\$500	\$500
	<b>Subtotal, Services &amp; Supplies</b>				<b>\$62,500</b>	<b>\$5,628</b>	<b>\$68,128</b>
<b>C. FACILITY RENT/LEASE/PURCHASE</b>							
	Grant funds for rental of project staff space, office equipment, locked patient files, utilities, etc., effective 7/1/04 to 6/30/05					\$5,835	\$5,835
<b>D. EQUIPMENT LEASE/PURCHASE</b>							
							\$0
<b>E. INDIRECT COSTS</b>							
					\$8,072	\$11,385	\$19,457
<b>TOTAL PROGRAM EXPENSES</b>							
					<b>\$288,214</b>	<b>95,304</b>	<b>383,518</b>
					<b>\$288,214</b>	<b>\$95,304</b>	<b>\$383,518</b>

09/25/2003

93.941

**EXHIBIT II**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**PUBLIC HEALTH SERVICE**  
**CENTERS FOR DISEASE CONTROL AND PREVENTION**

**NOTICE OF COOPERATIVE AGREEMENT**

AUTHORIZATION (LEGISLATION/REGULATION)

PHSA: 317/311/301 (42 USC 241/243/247B)

1. SUPERSEDES AWARD NOTICE DATED	
EXCEPT THAT ANY ADDITIONS OR RESTRICTIONS	
PREVIOUSLY IMPOSED REMAIN IN EFFECT UNLESS SPECIFICALLY RESCINDED.	
2. GRANT NO. A18/CCR921000-03	5. ADMINISTRATIVE CODES CCR18
3. PROJECT PERIOD FROM 09/30/2001	THROUGH 09/29/2004
4. BUDGET PERIOD FROM 09/30/2003	THROUGH 09/29/2004

6. TITLE OF PROJECT (OR PROGRAM)

**RECOMMENDING HIV/STD COUNSELING/TESTING IN AMBULATORY CLINIC ER**

7. GRANTEE NAME AND ADDRESS COUNTY OF LOS ANGELES-DHS DIR, COMMUNICABLE DISEASE CONTROL 313 N. FIGUEROA ST RM 222 LOS ANGELES, CA 90012	10. DIRECTOR OF PROJECT (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR) PETER R. KERNDT, MD., DIR STD PROGRAMS COUNTY OF LOS ANGELES - DHS 2615 S. GRAND AVENUE, ROOM 500 LOS ANGELES, CA 90007
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1. APPROVED BUDGET (EXCLUDES PHS DIRECT ASSISTANCE)		12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE																	
PHS GRANT FUNDS ONLY TOTAL PROJECT COSTS INCLUDING GRANT FUNDS AND ALL OTHER FINANCIAL PARTICIPATION (PLACE NUMERAL ON LINE) <u>I</u>		A. AMOUNT OF PHS FINANCIAL ASSISTANCE (FROM 11.U).....\$ 126,074 B. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIODS...\$ 126,074 C. LESS CUMULATIVE PRIOR AWARD(S) THIS BUDGET PERIOD...\$ 0 D. AMOUNT OF FINANCIAL ASSIST. THIS ACTION \$ 0																	
SALARIES AND WAGES.....\$ 59,037 FRINGE BENEFITS.....\$ 21,076 TOTAL PERSONNEL COSTS .....\$ 80,113 CONSULTANT COSTS.....0 EQUIPMENT.....0 SUPPLIES.....23,067 TEL.....1,880 PATIENT CARE-INPATIENT.....0 PATIENT CARE-OUTPATIENT.....0 ALTERATIONS AND RENOVATIONS.....0 OTHER.....21,014 CONSORTIUM/CONTRACTUAL COSTS.....0 TRAINEE RELATED EXPENSES.....0 TRAINEE STIPENDS.....0 TRAINEE TUITION AND FEES.....0 TRAINEE TRAVEL.....0 TOTAL DIRECT COSTS.....\$ 126,074 INDIRECT COSTS ( 0.00 % OF S&W/TADC) \$ 0 TOTAL APPROVED BUDGET.....\$ 126,074 SBIR FEE.....\$ 0 FEDERAL SHARE.....\$ 126,074 NON-FEDERAL SHARE.....\$ 0		13. RECOMMENDED FUTURE SUPPORT (SUBJECT TO THE AVAILABILITY OF FUNDS AND SATISFACTORY PROGRESS OF THE PROJECT) <table border="1"> <thead> <tr> <th>BUDGET YEAR</th> <th>TOTAL DIRECT COSTS</th> <th>BUDGET YEAR</th> <th>TOTAL DIRECT COSTS</th> </tr> </thead> <tbody> <tr> <td>A. 0</td> <td>0</td> <td>D. 0</td> <td>0</td> </tr> <tr> <td>B. 0</td> <td>0</td> <td>E. 0</td> <td>0</td> </tr> <tr> <td>C. 0</td> <td>0</td> <td>F. 0</td> <td>0</td> </tr> </tbody> </table> 14. APPROVED DIRECT ASSISTANCE BUDGET (IN LIEU OF CASH) A. AMOUNT OF PHS DIRECT ASSISTANCE.....\$ 0 B. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIODS...\$ 0 C. LESS CUMULATIVE PRIOR AWARDS FROM THIS BUDGET PERIOD \$ 0 D. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$ 0 15. PROGRAM INCOME SUBJECT TO 45 CFR PART 74, SUBPART F, OR 45 CFR 92.25, SHALL BE USED IN ACCORDANCE WITH ONE OF THE FOLLOWING ALTERNATIVES: (SELECT ONE AND PUT LETTER IN BOX.) A. DEDUCTION B. ADDITIONAL COSTS C. MATCHING <span style="border: 1px solid black; padding: 2px;">B</span> D. OTHER RESEARCH (ADD/DEDUCT OPTION) E. OTHER (SEE REMARKS)		BUDGET YEAR	TOTAL DIRECT COSTS	BUDGET YEAR	TOTAL DIRECT COSTS	A. 0	0	D. 0	0	B. 0	0	E. 0	0	C. 0	0	F. 0	0
BUDGET YEAR	TOTAL DIRECT COSTS	BUDGET YEAR	TOTAL DIRECT COSTS																
A. 0	0	D. 0	0																
B. 0	0	E. 0	0																
C. 0	0	F. 0	0																
THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE PHS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: A. THE GRANT PROGRAM LEGISLATION CITED ABOVE. B. THE GRANT PROGRAM REGULATION CITED ABOVE. C. THIS AWARD NOTICE INCLUDING TERMS AND CONDITIONS, IF ANY, NOTED BELOW UNDER REMARKS. D. PHS GRANTS POLICY STATEMENT INCLUDING ADDENDA IN EFFECT AS OF THE BEGINNING DATE OF THE BUDGET PERIOD. E. 45 CFR PART 74 OR 45 CFR PART 92 AS APPLICABLE. IN THE EVENT THERE ARE CONFLICTING OR OTHERWISE INCONSISTENT POLICIES APPLICABLE TO THE GRANT, THE ABOVE ORDER OF PRECEDENCE SHALL PREVAIL. ACCEPTANCE OF THE GRANT TERMS AND CONDITIONS IS ACKNOWLEDGED BY THE GRANTEE WHEN FUNDS ARE DRAWN OR OTHERWISE OBTAINED FROM THE GRANT PAYMENT SYSTEM.																			

MARKS (OTHER TERMS AND CONDITIONS ATTACHED - YES ☒ NO)

SPONSOR: NATIONAL CENTER FOR HIV PREVENTION

5. GRANTS MANAGEMENT OFFICER: (SIGNATURE) <i>Carlos M. Smiley</i>		(NAME-TYPED/PRINT) CARLOS M. SMILEY		(TITLE) GRANTS MANAGEMENT OFFICER	
OBJ. CLASS. 41.51		18. CRS.EIN: 1-956000927-A1		19. LIST NO.: CL-003-L04	
FY-CAN	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT. ACTION FIN. ASST	AMT. ACTION DIR. ASST	
A.	B.	C.	D.	E.	
A.	B.	C.	D.	E.	
A.	B.	C.	D.	E.	

SEP 29 2003

The purpose of this award is as follows:

1. To provide a 1 year extension which is year (3) with \$126,074 carryover funds in support of Program Announcement Number 01187.
2. With the acceptance and performance of this Cooperative Agreement requirement, the grantee hereby agrees to be bound by the terms and conditions identified herein via Notes and Special Provisions.

**NOTE 1: PUBLICATION**

The grantee is reminded that all written materials, audiovisual materials, pictorials, questionnaires, survey instruments, educational curricula and other relevant program materials must be reviewed and approved by an established program review panel. To meet the requirements for a program review panel, you are encouraged to use an existing program review panel, such as the one created by the State health department's HIV/AIDS prevention program. If you form your own program review panel, at least one member must be an employee (or a designated representative) of a State or local health department. The names of the review panel members should be listed on the Assurance of Compliance form, CDC O.1113, which is included in the application kit. If the proposed project involves hosting a conference, submit the program review panel's report stating that all materials, including the proposed conference agenda, have been approved this office at least 60 days prior to the conference. Before funds are used to develop educational materials, determine whether suitable materials already exist in the National Prevention Information Network at 1-800-458-5231 or [www.cdcnpi.org](http://www.cdcnpi.org).

*Not complying with these requirements will result in restrictions or disallowance of funds related to the use of unapproved materials. You can obtain a copy of these guidelines from the CDC website at [www.cdc.gov/od/pgo/forms/hiv.htm](http://www.cdc.gov/od/pgo/forms/hiv.htm).*

Materials that you (or those entities that you support with CDC funds) are currently using that have not received approval must be submitted immediately to your Program Review Panel for clearance. Documentation of the Panel's decision (for approval or disapproval), signed by the Panel chairperson, must be sent to Carlos M. Smiley, Grants Management Officer, at the address listed herein.

As you (or those entities that you support with CDC funds) develop or decide to use materials in your program, you must submit them to your Panel for review. Send documentation of the Panel's decision, signed by the Panel chairperson to CDC with your next scheduled progress report (i.e., quarterly narrative).

You are not permitted to reprint any materials that have not been reviewed and approved. Noncompliance with this policy after December 1, 2001, may cause your funds for these materials to be restricted or disallowed. Further noncompliance may result in your award being suspended or terminated.

Web page notices must be used on websites to alert individuals who may be searching or browsing the web. The certification of compliance with this requirement must be signed and returned to the Procurement and Grants Office. Not complying with these requirements will result in restrictions or disallowance of funds related to the use of the unapproved materials and related staff activities.

**NOTE 2:      INDIRECT COST**

<u>Type</u>	<u>From</u>	<u>To</u>	<u>Rate</u>	<u>Location</u>	<u>Applicable To</u>
No indirect requested.					

**NOTE 3:      PRIOR APPROVAL**

**PROCESS FOR E-MAIL SUBMISSIONS OF PRIOR APPROVALS FOR CDC GRANTS AND COOPERATIVE AGREEMENTS**

With the issuance of this document, the CDC hereby authorizes the use of e-mail submissions of Prior Approvals Request for CDC Grants and Cooperative Agreements. However, if electronic submissions are not available to the Grantee, hardcopy submission of the request shall still be accepted.

It is intended that, whenever practical and efficient, all steps in the submission of prior approval requests from grantee institutions and the replies from CDC to such requests be done electronically. This Notice does not represent a change in policy with regard to prior approval requirements discussed in the OMB Circular A-122. Rather, it is a change in formal procedure to allow these requests to be submitted and replied to via e-mail. The procedures for submitting such requests are detailed below.

All requests for CDC awarding office prior approval must be made, in writing, to the awarding office Grants Management Officer listed on the Notice of Grant Award no later than 30 days before the proposed change. Failure to obtain prior approval, when required, from the appropriate CDC awarding office may result in the disallowance of costs, termination of an award, or other enforcement action within CDC's authority.

Grantee Procedures:

An authorized official of the grantee business office shall initiate the request. It shall include stated coordination with either the principal investigator or program director. It must include the title, institution, telephone number, fax number and e-mail address of both officials. Internal institutional guidelines for the evaluation and approval of the request are the responsibility of the grantee institution. The request, when submitted to CDC, must be transmitted by the authorized institutional official.

When transmitting the request, the authorized institutional official's name, title and institution, telephone number, fax number and e-mail address must be included. It is understood that the transmission of electronic prior approval requests is a clear expression of institutional approval and that all internal procedures have been properly completed. Additionally, the grantee will be responsible for any internal distribution of the request.

The request should include the complete grant number and Program Announcement in the subject line of the e-mail. All information and justification must be included in either plain text in the body of the e-mail request or as an attachment. If unable to transmit the entire request in either of these formats then the request in its entirety must be submitted via "hard-copy."

The requests should be sent to the Grants Management Officer who signs the Notice of Grant Award, a copy should also be furnished to the Grant Management Specialist and the Program Project Officer.

E-mail addresses for CDC staff can be obtained are enclosed herein. However, please check with the Grant Management Specialist to verify current e-mail addresses.

All requests that require the prior approval of the Grants Management Officer must bear the signature of an authorized official of the grantee business office as well as that of the principal investigator or program director. Any request received without two signatures will be returned.

Carlos M. Smiley, Grants Management Officer  
Centers for Disease Control and Prevention (CDC)  
Procurement and Grants Office  
2920 Brandywine Road  
Room 3000  
Mail Stop E-15  
Atlanta, GA 30341  
e-mail: [Csmiley1@cdc.gov](mailto:Csmiley1@cdc.gov)

ATTENTION: Brenda Hayes [bkh4@cdc.gov](mailto:bkh4@cdc.gov)

**NOTE 4: TECHNICAL REVIEW**

N/A

**NOTE 5: DEFERRED COSTS**

Items/activities not currently funded, but deferred because of insufficient funds, may be funded within the budget period, should supplemental funds become available.

**NOTE 6: UNOBLIGATED BALANCE**

The amount of \$126,074 unobligated funds from prior budget periods is carried forward for use in this budget period.

Carryover of unobligated funds identified in an Interim Progress Report (Continuation request) or a Financial Status Report (FSR), SF 269, is subject to a reduction in the awarded amount in the event that a final FSR is submitted for an amount less than the previously report amount.

**NOTE 7: DIRECT ASSISTANCE FUNDS**

No direct assistance funds (DA) were awarded.

**NOTE 8: REPORTING REQUIREMENTS**

**PROCESS FOR E-MAIL SUBMISSIONS OF PROGRESS REPORTS AND ANNUAL FINANCIAL STATUS REPORTS FOR CDC GRANTS AND COOPERATIVE AGREEMENTS.**

With the issuance of this document, the CDC hereby authorizes the use of e-mail submissions of Progress Reports and Annual Financial Status Reports for CDC Grants and Cooperative Agreements. However, if electronic submissions are not available to the Grantee, hardcopy submission of the request shall still be accepted.

**Progress Report and Annual Financial Status Report:**

An authorized official of the grantee business office shall initiate the report. It shall include stated coordination with the either the principal investigator or program director. It must include the title, institution, telephone number, fax number and e-mail address of both officials. Internal institutional guidelines for the evaluation and approval of the request are the responsibility of the grantee institution. The request, when submitted to CDC, must be transmitted by the authorized institutional official.

It is understood that with the transmission of electronic reports by the grantee, it is a clear expression of institutional approval and that all internal procedures have been properly completed. Additionally, the grantee will be responsible for any internal distribution of the request.

The request should include the complete grant number and Program Announcement in the subject line of the e-mail. All documentation must be included in either plain text in the body of the e-mail request or as an attachment thereto. If unable to transmit the entire request in either of these formats, then the request in its entirety must be submitted via "hard-copy."

The requests should be sent to the Grants Management Officer who signs the Notice of Grant Award, a copy should also be furnished to the Grant Management Specialist and the Program Project Officer.

E-mail addresses for CDC staff can be obtained are enclosed herein. However, please check with the Grant Management Specialist to verify current e-mail addresses.

**CONTENT OF REPORT:**

Your progress report shall be submitted on an annual basis and due 90 days after the budget period December 29, 2004.

The **progress report** must include the following for each program, function, or activity involved:

- (1) a description of the program accomplishments and a comparison of actual accomplishments with the objectives established in the work plan for the funding period;
- (2) other pertinent information that includes, but not limited to analysis and explanation of unexpected delays or high costs of performance and a listing of presentations and publications produced by, supported by, or related to program activities; and
- (3) summary of data (subject to approval by the Office of Management and Budget (OMB)).

Your **financial status report (FSR)** must be submitted as follows:

An **ANNUAL** Financial Status Report (FSR) must be submitted within 90 days after the end of the budget period. This report must be submitted on the Form SF269, and include only those funds authorized and actually expended during the prior year budget period.

A **FINAL** Progress report is due 90 days after the project period end date. The final report should summarize the entire project. (NOTE: The format for the progress report may be obtained from your project officer).

Either e-mail or Hardcopy submissions shall be directly to:

Carlos M. Smiley, Grants Management Officer  
Centers for Disease Control and Prevention (CDC)  
Procurement and Grants Office  
2920 Brandywine Road, Room 3000, MS E-15  
Atlanta, GA 30341-5539  
e-mail address: [Csmiley1@cdc.gov](mailto:Csmiley1@cdc.gov)

ATTN.: Brenda Hayes

**NOTE 9: PAYMENT INFORMATION**

Payment under this award will be direct drawdown through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS is administered by the Division of Payment Management, Office of Resource Management, Public Health Service (PHS). PMS will forward the DHHS Manual for Recipients Financed Under the Payment Management System (PMS), PMS-270 and PMS-272 forms.

- A. PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows:

Division of Payment Management, ORM/PHS  
P.O. Box 6021  
Rockville, MD 20852

If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows:

Division of Payment Management, ORM/PHS  
Rockwall Building, Room 840  
11400 Rockville Pike  
Rockville, MD 20852

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.



CDC CONTACT LIST

GRANTS MANAGEMENT SPECIALIST

Brenda Hayes  
Centers for Disease Control and Prevention (CDC)  
Procurement and Grants Office  
2920 Brandywine Road, Room 3000, MS E-15  
Atlanta, GA 30341-5539  
Telephone: (770) 488-2741  
Fax: (770) 488-2670  
e-mail address: bkh4@cdc.gov

CDC PROJECT OFFICER

Sheryl Lyss  
Project Officer  
Centers for Disease Control & Prevention (CDC)  
Division of HIV/AIDS Prevention  
Corporate Square, Bldg. 8, MS, E-46  
Atlanta, GA 30333  
Telephone: (404) 639-2093  
Fax: (404) 639-2029  
E-Mail: sml8@cdc.gov

**SPECIAL PROVISIONS**

The following provisions are incorporated by reference from Title 45 - Public Welfare, Subtitle JHHS, Part 74 - UNIFORM ADMINISTRATIVE REQUIREMENTS FOR AWARDS AND SUBAWARDS TO INSTITUTIONS OF HIGHER EDUCATION, HOSPITALS, OTHER NONPROFIT ORGANIZATIONS, AND COMMERCIAL ORGANIZATIONS;

74.1	Purpose and applicability
74.2	Definitions.
74.5	Subawards
74.13	Debarment and suspension
74.14	Special award Conditions
74.17	Certifications and representations
74.21	Standards for financial management systems
74.22	Payment
74.24	Program Income
74.25	Revision of budget and program plans
74.26	Non-Federal audits
74.27	Allowable Costs
74.28	Period of availability of funds
74.33	Federally owned and exempt property
74.34	Equipment
74.35	Supplies
74.41	Recipient Responsibilities
74.42	Codes of Conduct
74.51	Monitoring and Reporting program performance
74.52	Financial Reporting
74.53	Retention and access requirements for records
74.61	Termination
74.62	Enforcement
74.71	Closeout Procedures
74.73	Collection of amounts due
74.82	Program Income

Provisions incorporated by reference have the same force and effect as if they were given in full text. Source: 45 CFR Part 74. Copies of Code of Federal Regulation volumes are available in many libraries and for purchase from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402. Copies of OMB Circulars referenced in the provisions may be obtained from the Office of Administration, Publications Unit, Room G-236, New Executive Office Building, Washington, D.C. 20503. An index of existing Circulars is contained in 5 CFR 1310.

03/11/200493.941

1. SUPERSEDES AWARD NOTICE DATED  
XCEPT THAT ANY ADDITIONS OR RESTRICTIONS  
PREVIOUSLY IMPOSED REMAIN IN EFFECT UNLESS SPECIFICALLY RESCINDED.

5. GRANT NO.  
R18/CCR921000-03-1

5. ADMINISTRATIVE CODES  
CCR18

1. PROJECT PERIOD  
FROM 09/30/2001  
THROUGH 09/29/2004

1. BUDGET PERIOD  
FROM 09/30/2003  
THROUGH 09/29/2004

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
CENTERS FOR DISEASE CONTROL AND PREVENTION  
  
NOTICE OF COOPERATIVE AGREEMENT  
  
AUTHORIZATION (LEGISLATION/REGULATION)  
PHSA: 317/311/301 (42 USC 241/243/247B)  
  
EXHIBIT III

1. TITLE OF PROJECT (OR PROGRAM)  
RECOMMENDING HIV/STD COUNSELING/TESTING IN AMBULATORY CLINIC ER

2. GRANTEE NAME AND ADDRESS  
COUNTY OF LOS ANGELES-DHS  
DIR, COMMUNICABLE DISEASE CONTROL  
313 N. FIGUEROA ST RM 222  
LOS ANGELES, CA 90012

10. DIRECTOR OF PROJECT (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR)  
PETER R. KERNDT, MD., DIR STD PROGRAMS  
COUNTY OF LOS ANGELES - DHS  
2615 S. GRAND AVENUE, ROOM 500  
LOS ANGELES, CA 90007

1. APPROVED BUDGET (EXCLUDES PHS DIRECT ASSISTANCE)

12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE

PHS GRANT FUNDS ONLY  
1. TOTAL PROJECT COSTS INCLUDING GRANT FUNDS AND ALL OTHER FINANCIAL PARTICIPATION  
(PLACE NUMERAL ON LINE) I

SALARIES AND WAGES.....\$ 141,689  
FRINGE BENEFITS.....\$ 50,582  
TOTAL PERSONNEL COSTS .....\$ 192,271  
CONSULTANT COSTS.....0  
EQUIPMENT.....0  
SUPPLIES.....23,067  
TRAVEL.....1,880  
PATIENT CARE-INPATIENT.....0  
PATIENT CARE-OUTPATIENT.....0  
ALTERATIONS AND RENOVATIONS.....0  
OTHER.....49,285  
CONSORTIUM/CONTRACTUAL COSTS.....0  
TRAINEE RELATED EXPENSES.....0  
TRAINEE STIPENDS.....0  
TRAINEE TUITION AND FEES.....0  
TRAINEE TRAVEL.....0  
TOTAL DIRECT COSTS.....\$ 266,503  
INDIRECT COSTS ( 0.00 % OF S&W/TADC) \$ 0  
TOTAL APPROVED BUDGET.....\$ 266,503  
SBIIR FEE.....\$ 0  
FEDERAL SHARE.....\$ 266,503  
NON-FEDERAL SHARE.....\$ 0

A. AMOUNT OF PHS FINANCIAL ASSISTANCE (FROM 11.U).....\$ 266,503  
B. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIODS..\$ 126,074  
C. LESS CUMULATIVE PRIOR AWARD(S) THIS BUDGET PERIOD...\$ 0  
D. AMOUNT OF FINANCIAL ASSIST.THIS ACTION \$ 140,429

13. RECOMMENDED FUTURE SUPPORT (SUBJECT TO THE AVAILABILITY OF FUNDS AND SATISFACTORY PROGRESS OF THE PROJECT)

BUDGET YEAR	TOTAL DIRECT COSTS	BUDGET YEAR	TOTAL DIRECT COSTS
A. 0	0	D. 0	0
B. 0	0	E. 0	0
C. 0	0	F. 0	0

14. APPROVED DIRECT ASSISTANCE BUDGET (IN LIEU OF CASH)  
A. AMOUNT OF PHS DIRECT ASSISTANCE.....\$ 0  
B. LESS UNOBLIGATED BALANCE FROM PRIOR BUDGET PERIODS..\$ 0  
C. LESS CUMULATIVE PRIOR AWARDS FROM THIS BUDGET PERIOD\$ 0  
D. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$ 0

15. PROGRAM INCOME SUBJECT TO 45 CFR PART 74,SUBPART F,OR 45 CFR 92.25, SHALL BE USED IN ACCORDANCE WITH ONE OF THE FOLLOWING ALTERNATIVES: (SELECT ONE AND PUT LETTER IN BOX.)  
A. DEDUCTION  
B. ADDITIONAL COSTS  
C. MATCHING  
D. OTHER RESEARCH(ADD/DEDUCT OPTION)  
E. OTHER (SEE REMARKS)

THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE PHS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:  
A.THE GRANT PROGRAM LEGISLATION CITED ABOVE. B.THE GRANT PROGRAM REGULATION CITED ABOVE. C.THIS AWARD NOTICE INCLUDING TERMS AND CONDITIONS,IF ANY,NOTED BELOW UNDER REMARKS. D.PHS GRANTS POLICY STATEMENT INCLUDING ADDENDA IN EFFECT AS OF THE BEGINNING DATE OF THE BUDGET PERIOD. E.45 CFR PART 74 OR 45 CFR PART 92 AS APPLICABLE. IN THE EVENT THERE ARE CONFLICTING OR OTHERWISE INCONSISTENT POLICIES APPLICABLE TO THE GRANT, THE ABOVE ORDER OF PRECEDENCE SHALL PREVAIL. ACCEPTANCE OF THE GRANT TERMS AND CONDITIONS IS ACKNOWLEDGED BY THE GRANTEE WHEN FUNDS ARE DRAWN OR OTHERWISE OBTAINED FROM THE GRANT PAYMENT SYSTEM.

REMARKS (OTHER TERMS AND CONDITIONS ATTACHED - YES ☒ NO ☐

SPONSOR: NATIONAL CENTER FOR HIV PREVENTION

1. GRANTS MANAGEMENT OFFICER: (SIGNATURE)  
Carlos M. Smiley

(NAME-TYPED/PRINT)  
CARLOS M. SMILEY

(TITLE)  
GRANTS MANAGEMENT OFFICER

2. OBJ. CLASS. 41.51

18. CRS.EIN: 1-956000927-A1

19. LIST NO.: CO-064-L04

FY-CAN  
04-11515 04-92100FZ

DOCUMENT NO.  
CCR921000

ADMINISTRATIVE CODE  
CCR18

AHT.ACTION FIN.ASST  
140,429

AHT.ACTION DIR.ASST  
0

5-5152-1 (REV.7/92) (MODIFIED CDC VERSION 10/92)

MAR 22 2004

**NOTICE OF AWARD****PAGE 2 OF 2****DATE ISSUED***(Continuation Sheet)***AWARD NO. R18/CCR921000-03-01****TERMS AND CONDITIONS OF THIS AWARD**

The purpose of this amended Notice of Award is to provide supplemental funds of \$140,429 as requested in the letter dated January 8, 2003. The requested amount of \$140,429 is comprised of new funds. All other terms and conditions remain the same.

Budget Category	Year 03 Original Award	Supplemental Change	Year 03 Revised Award
Salaries and Wages	\$59,037	\$82,652	\$141,689
Fringe Benefits	\$21,076	\$29,506	\$50,582
Consultants	\$0	\$0	\$0
Equipment	\$0	\$0	\$0
Supplies	\$23,067	\$0	\$23,067
Travel	\$1,880	\$0	\$1,880
Other	\$21,014	\$28,271	\$49,285
Contractual	\$0	\$0	\$0
<b>Total Direct Costs</b>	<b>\$126,074</b>	<b>\$140,429</b>	<b>\$266,503</b>
<b>Indirect Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Total Award</b>	<b>\$126,074</b>	<b>\$140,429</b>	<b>\$266,503</b>

PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE.

**From:** "Hayes, Brenda D." <bkh4@cdc.gov>  
**To:** "Lyss, Sheryl" <sml8@cdc.gov>, <casas3@msn.com>, "Kerndt, Peter" <pkerndt@dhs.co.la.ca.us>  
**Date:** Tue, Mar 30, 2004 4:23 AM  
**Subject:** RE: Corrected statement in notice of cooperative agreement

As stated in Sheryl's email below. This email serves as notification of a change on the NGA. Please change the date from January 8, 2003 to January 8, 2004.

Thanks

Brenda Hayes  
Grants Management Specialist  
Centers for Disease Control and Prevention  
2920 Brandywine Road  
Atlanta, GA 30341  
770-488-2741 (Phone)  
770-488-2670 (Fax)

> -----Original Message-----

> From: Lyss, Sheryl  
> Sent: Monday, March 29, 2004 11:16 AM  
> To: Apurva Uniyal (casas3@msn.com); Kerndt, Peter  
> Cc: Hayes, Brenda D.  
> Subject: Corrected statement in notice of cooperative agreement

>

> Apurva and Peter-

>

> I spoke with Brenda Hayes, the grants specialist in PGO. She will email you a statement stating that the letter referred to on p. 2 in the notice of cooperative agreement was dated January 8, 2004 rather than January 8, 2003. She will try to email that statement today.

>

> Brenda, thank you very much. You will now have the respective email addresses above.

>

> Thanks,

> Sheryl

**CC:** "Hayes, Brenda D." <bkh4@cdc.gov>